

HOME OCCUPATION ZONING PERMIT APPLICATION

Control #	
Received:	

WAYLVANIA	NOTICE: PENNSYLVAN FOR MAKING A FALSE	NIA LAW (18 Pa. C.S. STATEMENT TO PU	. § 4904) I JBLIC O	PROVIDES CRIMIN FFICIALS.	NAL PENALTIES		
PROPERTY ADDR							
PROPERTY OWN	ER(S)	F	PHONE				
MAILING ADDRES				EMAIL			
*APPLICANT NAN	ME	PHONE					
*APPLICANT ADD		FNAAII					
*Attach owner au	thorization (if different from property		esidency ((utility bill, driver's li	cense, etc.)		
DESCRIPTION OF	PROPOSED HOME OCCUPATION						
LOCATION OF HO	OME OCCUPATION	П НОМЕ	DE	TACHED GARAGE*	□ OTHER*		
FLOOR AREA OF	HOME OCCUPATION			SQ. FT.			
	TOTAL HABITABLE FLOOR AREA	□ 25% C		☐ OVER 25%*	□ DON'T KNOW*		
* Floor plan requi	ired if located outside primary dwelling	g, or if percentage of t	otal floor	area over 25% or u	nknown.		
TOTAL EMPLOYE	ES (INCLUDING APPLICANT):	# LIVIN	# LIVING IN THE HOME				
		# LIVIN	ng some	EWHERE ELSE			
TOTAL VEHICLES	USED:	PARKE	PARKED ON THE STREET				
(PARKING/LOADI	PARKE	PARKED OFF STREET (INCLUDING GARAGE)					
				, OR OTHER LARGE	VEHICLES*		
* Parking plan red	quired—describe vehicles to be used in	operation and show	parking/l	loading spaces			
WILL ANY CHANG	GES TO BUILDING BE REQUIRED?	☐ INTERI	IOR WOF	₹K □ EX	XTERIOR WORK		
☐ SIGNAGE	E ☐ LIGHTING ☐ OTHER ((DESCRIBE):		D N	O CHANGES		
DESCRIBE ANY GO	OODS TO BE DISPLAYED FOR SALE:	□ NO		YES (DESCRIBE):			
WILL CUSTOMERS	S BE ALLOWED ON SITE?	□ NO		YES (HOW OFTEN?	")		
WILL DELIVERIES	BE RECEIVED ON SITE?	□ NO		YES (HOW OFTEN?	')		
	The business will not use any eq interference, or any other nuisar	uipment that creates nce detectable to the	noise, vi neighbo	bration, glare, fume rhood.	s, odors, electronic		
Applicant must read and initial	The above information is accura changes, I am required to notify	bove information is accurate to the best of my knowledge. If any of the above information jes, I am required to notify the Zoning Office.					
	I understand that I am responsib	le to obtain a Busines	ss Privileç	ge License.			
-	I understand that if the property from the Historic Preservation O	vis located in a histor Office before beginnin	ic district g any ex	t, I must obtain writt terior work or instal	ten authorization ling signage.		
_	I understand that approval appli obtain inspections, certificates, c	ies to <u>zoning only</u> and or permits from other	d does no City offi	ot relieve me from t ces or from the stat	he responsibility to e as applicable.		
By signing this	form I am declaring under nen						

By signing this form, I am declaring under penalty of law that the above information is accurate

Applicant's Signature:	Date:
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OF READING OF READING

☐ *LLC/corporation/*

other entity

CITY OF READING, PENNSYLVANIA

Owner Authorization for Zoning Permit Application

NOTICE: PA CRIMES CODE (18 Pa.C.S. § 4904) PROVIDES CRIMINAL PENALTIES FOR MAKING A FALSE STATEMENT TO PUBLIC OFFICIALS.

I/We, the undersigned Property Owner(s) or agent thereof, do hereby affirm as follows:

1.	I am (we are) the lawful owner(s), or its agent, of the property located at the following address (Subject Property):					
	Address of Subject Property:					
2.	2. The individual named below (Applicant) has my/our permission to apply for a zoning permit for the undescribed below at the Subject Property:					
	Name of Applicant:					
	Description of Proposed Use:					
3.	3. By signing this form, I/we acknowledge that enforcement actions for any violations of the City of Reading Zoning Ordinances may be brought against me/us as the owner(s) of the Subject Property, including civil penalties up to \$500 per day.					
	Ownership type (check one box and complete applicable section only):					
	☐ Individual	Owner name	Signature			
	☐ Two or more individuals	Name of each owner	Signature of each owner			

Owner entity name

Authorized officer's name

Authorized officer's title

Date Received:	
Date Neceived.	

Authorized officer's signature